

Act 62 went into effect on July 1, 2009 for new or renewing contracts for most employer groups with at least 51 full time employees. These employer groups will offer autism services for individuals under age 21 up to a maximum benefit of \$36,000 per benefit year. Please note that UPMC *for Life* Medicare products are not affected by Act 62 and UPMC *for You* Medicaid will continue to cover without limits. UPMC *for Kids* will not be affected by Act 62 at this time.

The Act 62 mandate includes coverage for diagnostic assessments, and **a treatment plan that includes pharmacy care, psychiatric care, psychological care, rehabilitative care and therapeutic care including speech/language therapy, occupational therapy and physical therapy.** Determination of coverage will be made following UPMC Health Plan's review of the treatment plan based upon the recommendations of the American Academy of Pediatrics and UPMC Health Plan's assessment of medical necessity as set forth by Health Plan policy and the member's specific benefit plan.

**The treatment plan must be developed by a physician or licensed psychologist and will be reviewed every twelve (12) months unless more frequent review is requested by the member's physician or practitioners.**

Treatment may be prescribed, ordered or provided by a licensed physician, licensed physician assistant, licensed psychologist, licensed social worker, Certified Registered Nurse Practitioner or Autism Service Provider. Again, the coverage limit is \$36,000 per benefit year for services approved in the treatment plan. Treatment plans should be submitted to the following address:

**UPMC Health Plan  
Behavioral Health Services  
Attn: Autism, 8th Floor  
112 Washington Place  
One Chatham Center  
Pittsburgh, PA 15219**